

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		4/30/99
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	71480 10	5/4/98
FORMALITY REVIEW	<i>[Signature]</i>		5-10-99

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	04/29/02
2	✓	✓	01/27/03
3	✓	✓	04/03/03
4	✓	✓	10/17/03
5	✓	✓	08/13/04
6	✓	✓	
7	✓	✓	
8	✓	✓	
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If more than 150 claims or 10 actions  
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Best Available Copy